

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	<u>AERODYNAMIC IMPROVEMENT FOR AN UNCOVERABLE VEHICLE</u>
Attorney Docket Number::	0510-1110
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: GERARD  
Middle Name::  
Family Name:: QUEVEAU  
Name Suffix::  
City of Residence:: LE PIN  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing AMIK-FARM  
Address::  
City of Mailing Address:: LE PIN  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 79140

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: PAUL  
Middle Name::  
Family Name:: QUEVEAU  
Name Suffix::  
City of Residence:: MONTRAVERS  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing LE LOGIS DE LA CHIRONNIERE  
Address::  
City of Mailing Address:: MONTRAVERS

State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 79140

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JACQUES  
Middle Name::  
Family Name:: GANDEMER  
Name Suffix::  
City of Residence:: NANTES  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 6 QUAI HENRI BARBUSSE  
City of Mailing Address:: NANTES  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 44000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-PAUL  
Middle Name::  
Family Name:: BOUCHET  
Name Suffix::  
City of Residence:: CASSON  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 30 RUE DE L'AUBIER

Address::

City of Mailing Address:: CASSON

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 44390

**Correspondence Information**

Correspondence Customer

00466

Number::

**Representative Information**

Representative Customer

00466

Number::

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR03/02319	7/22/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02 09253	7/22/02	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::